

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

108107842

FILING DATE

03-25-04

APPLICANT(S)

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS	
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	/							
2		/						
3		/						
4		/						
5		/						
6		/						
7		/						
8		/						
9		/						
10		/						
11		/						
12		/						
13		/						
14		/						
15		2						
16		2						
17		2						
18		2						
19		2						
20	/							
21		/						
22		/						
23		0						
24	/							
25		/						
26		/						
27		0						
28	/							
29								
30		/						
31		/						
32		/						
33		/						
34		/						
35		/						
36		/						
37	/							
38		/						
39		/						
40	/							
41	/							
42	/							
43		/						
44		/						
45		/						
46		/						
47		/						
48		/						
49		/						
50		/						
TOTAL IND.	9							
TOTAL DEP.	45							
TOTAL CLAIMS	54							

IND	DEP	IND	DEP	IND	DEP
51					
52					
53					
54					
55					
56					
57					
58					
59					
60					
61					
62					
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92					
93					
94					
95					
96					
97					
98					
99					
100					
TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					